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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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|--|----------------------------------|
| Applicant : Philippe Mengal and Bernard Mompon | Group Art Unit: Examiner: |
| Serial No. : 09/102,788 | |
| Filed : June 23, 1998 | |
| For : METHOD AND PLANT FOR SOLVENT-FREE MICROWAVE EXTRACTION OF NATURAL PRODUCTS | |
| Docket No. : A398.312-0002 | |

SECOND PRELIMINARY AMENDMENT

Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

I CERTIFY THAT THIS PAPER IS BEING SENT BY U.S. MAIL, FIRST CLASS, TO THE ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231, THIS 7th DAY OF December, 1998.
Philip P. For
PATENT ATTORNEY

Sir:

Please amend the above-identified application via this Second Preliminary Amendment as follows:

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IN THE CLAIMS

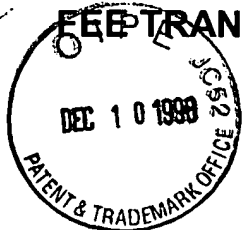
Please cancel claims 6-7, 10, and 12-13.

Please amend claims 1, 3, 8-9, and 16 as follows:

1. (Twice Amended) A method for the microwave extraction of [at least one] a natural product from a biological material, said method comprising:

B1
CONT'D.

placing said biological material in an enclosure without any solvent;
[making] applying microwave radiation to said biological material present in said enclosure, [undergo microwave irradiation in order to prompt the evaporation of] the microwave radiation effective to evaporate at least a part of the water contained in said biological material and [, consequently,] the microwave radiation effective to split[ting up of] the cellular structure[s] of said



| <div style="text-align: right;">1643/ \$</div> <div style="text-align: center;">FEE TRANSMITTAL</div> | | Delete, if Known | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------------|--|-----------------------|---|-----------------------|-----------------|----------|-------|-----|-----|---|-----------|-----|--------|-----|--|-----|------------|-----|---------------------------|---|-----|-----|-----|----|---|-----------------------|-----------------------|-----------------------|-------------|-----|----|-----|---|------------------------|-----|----|-----|----|-----------------------------------|-----|-----|-----|-----|--------------------------|-----|----|-----|----|------------------------------------|-----|----|-----|---|---|-----------------------|--|--|--|--|--|--|
| | | Application No. | 09/102,788 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Filing Date | June 23, 1998 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | First Named Inventor | Philippe Mengal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Group Art Unit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Examiner Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Amount of Payment: \$141.00 | | Atty. Docket Number | A398.312-0002 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| METHOD OF PAYMENT (Check One) | | FEE CALCULATION (Continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fee required under 37 C.F.R. 1.16 and 1.17 and credit any over payments to Deposit Account No. 11-0982. Deposit Account Name: Kinney & Lange, P.A. | | 3. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. <input checked="" type="checkbox"/> Check Enclosed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. BASIC FILING FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th></tr></thead><tbody><tr><td>101</td><td>760</td><td>201</td><td>380</td><td><input type="checkbox"/> Utility Filing Fee</td></tr><tr><td>106</td><td>310</td><td>206</td><td>155</td><td><input type="checkbox"/> Design Filing Fee</td></tr><tr><td>108</td><td>760</td><td>208</td><td>380</td><td><input type="checkbox"/> Reissue Filing Fee</td></tr><tr><td>114</td><td>150</td><td>214</td><td>75</td><td><input type="checkbox"/> Prov. Filing Fee</td></tr><tr><td colspan="5" style="text-align: right;">Subtotal (1) \$0</td></tr></tbody></table> | | Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | 101 | 760 | 201 | 380 | <input type="checkbox"/> Utility Filing Fee | 106 | 310 | 206 | 155 | <input type="checkbox"/> Design Filing Fee | 108 | 760 | 208 | 380 | <input type="checkbox"/> Reissue Filing Fee | 114 | 150 | 214 | 75 | <input type="checkbox"/> Prov. Filing Fee | Subtotal (1) \$0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 101 | 760 | 201 | 380 | <input type="checkbox"/> Utility Filing Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 106 | 310 | 206 | 155 | <input type="checkbox"/> Design Filing Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 108 | 760 | 208 | 380 | <input type="checkbox"/> Reissue Filing Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 114 | 150 | 214 | 75 | <input type="checkbox"/> Prov. Filing Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subtotal (1) \$0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. EXTRA CLAIM FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%"><thead><tr><th></th><th>Number Claims</th><th>Prior**</th><th>Extra</th><th>Fee from Below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Total</td><td>27</td><td>-</td><td>20</td><td>= 7 x 9 =</td><td>63</td></tr><tr><td>Indép.</td><td>5</td><td>-</td><td>3</td><td>= 2 x 39 =</td><td>78</td></tr><tr><td>Multiple Dependent Claims</td><td></td><td></td><td></td><td>* =</td><td>*</td></tr></tbody></table> <p>**Insert 3 and 20, or number previously paid if greater; Reissue see below</p> <table border="1" style="width:100%"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Description</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td></tr><tr><td>102</td><td>78</td><td>202</td><td>39</td><td>Independent claims in excess of 3</td></tr><tr><td>104</td><td>260</td><td>204</td><td>130</td><td>Multiple Dependent Claim</td></tr><tr><td>109</td><td>78</td><td>209</td><td>39</td><td>Reissue Independent Claims Over 20</td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>Reissue claims in excess of 20 and over original patent</td></tr><tr><td colspan="5" style="text-align: right;">Subtotal (2) \$141.00</td></tr></tbody></table> | | | Number Claims | Prior** | Extra | Fee from Below | Fee Paid | Total | 27 | - | 20 | = 7 x 9 = | 63 | Indép. | 5 | - | 3 | = 2 x 39 = | 78 | Multiple Dependent Claims | | | | * = | * | Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Description | 103 | 18 | 203 | 9 | Claims in excess of 20 | 102 | 78 | 202 | 39 | Independent claims in excess of 3 | 104 | 260 | 204 | 130 | Multiple Dependent Claim | 109 | 78 | 209 | 39 | Reissue Independent Claims Over 20 | 110 | 18 | 210 | 9 | Reissue claims in excess of 20 and over original patent | Subtotal (2) \$141.00 | | | | | | |
| | Number Claims | Prior** | Extra | Fee from Below | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 27 | - | 20 | = 7 x 9 = | 63 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Indép. | 5 | - | 3 | = 2 x 39 = | 78 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent Claims | | | | * = | * | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102 | 78 | 202 | 39 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104 | 260 | 204 | 130 | Multiple Dependent Claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 109 | 78 | 209 | 39 | Reissue Independent Claims Over 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 | 18 | 210 | 9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subtotal (2) \$141.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 581 40 581 40 Recording each patent assignment per property (times number of properties) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Other fee (specify) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Signature Philip F. Fox Reg. No. 38,142
Date 12/7/98 Deposit Account No. 11-0982